## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48			
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)				
	C C00553560			
Check if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y			
Full Name of Payee	Date of Public Distribution/Dissemination			
FORTH RIGHT STRATEGY INC	M M / D D / Y Y Y Y			
Mailing Address 1155 - 15TH STREET NW	08 10 2016 Amount			
SUITE 410	Amount			
City State Zip Code	1147.22			
WASHINGTON DC 20005	Transaction ID : SE.38203 Date of Disbursement or Obligation			
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type  004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office	Sought: House District: 00			
TIMOTHY E SCOTT Oppose	President Senate State: SC			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	rrsement For: Primary X General  Other (specify) ▶			
Full Name of Payee FORTH RIGHT STRATEGY INC	Date of Public Distribution/Dissemination			
1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	08 10 2016			
Mailing Address 1155 - 15TH STREET NW	Amount			
SUITE 410	Allount			
City State Zip Code	1147.22			
WASHINGTON DC 20005	Transaction ID : SE.38204 Date of Disbursement or Obligation			
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type  004	08 10 / 2016			
Name of Federal Candidate Support Office	e Sought: House District:00			
BENJAMIN E SASSE Oppose	President State: NE			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2140.50	ursement For: Primary			
(a) CURTOTAL of Hamirad Indonesiant Fire and items				
(a) SUBTOTAL of Itemized Independent Expenditures	2294.44			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
	8 12 2016			
Signature				

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXPEND	HONES		PAGE 2 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPU	RI ICAN DART	·V)	FEC ID	ENTIFICATION NUMBER ▼
VIGOF (VIIXGIIV ISLANDS KEFO	DLICAN FAITI	1)	C	C00553560
Check if 24-hour report X 48-hour repor	t New rep	port Amends repo	rt filed on/	D = D / Y = Y = Y
Full Name of Payee FORTH RIGHT STRATEGY IN	С		M = M /	Distribution/Dissemination
Mailing Address 1155 - 15TH STREET NW			08 Amount	10 2016
SUITE 410		7: 0 !		
City WASHINGTON	State DC	Zip Code 20005	Transaction II	1147.22  D: SE.38205 rsement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	08	10 / 2016
Name of Federal Candidate		Support	Office Sought:	House District: 00
PATRICK JOSEPH TOOMEY		Oppose	President >	Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	.,,.,,	1686.72	Disbursement For: 2016 Other (spe	Primary
Full Name of Payee			Date of Public	Distribution/Dissemination
FORTH RIGHT STRATEGY INC			M M /	10 2016
Mailing Address 1155 - 15TH STREET NW			Amount	
SUITE 410			Amount	
City WASHINGTON	State DC	Zip Code	Transaction ID	1147.22
		20005		rsement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	08 /	10 / 2016
Name of Federal Candidate		X Support	Office Sought:	House District:00
KELLY A AYOTTE		Oppose	President >	Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		1203.34	Disbursement For: 2016 Other (sp	Primary
•				
(a) SUBTOTAL of Itemized Independent Expe	nditures		. >	2294.44
(b) SUBTOTAL of Unitemized Independent Ex	penditures		•	7
(c) TOTAL Independent Expenditures			•	1 7 1 2
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any committee) any political party committee	andidate or authorized			
SCOTT B MACKENZIE Signature	[Electron	nically Filed] Date	08 / 12	2016
g				

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

ooneddie Ej	FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)	C C00553560			
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y = Y			
Full Name of Payee  EODTH DICHT STRATECY INC	te of Public Distribution/Dissemination			
FORTH RIGHT STRATEGY INC	08 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1155 - 15TH STREET NW				
SUITE 410	nount			
City State Zip Code	1147.22			
Da	ansaction ID : SE.38207 te of Disbursement or Obligation			
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type  004	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office Soil	ught: House District: 00			
POR DOPTMAN	sident State: OH			
Calendar Year-To-Date Per Election for Office Sought  Disbursen 2016				
Tel Election for Since Godgitt	Other (specify)			
Full Name of Payee FORTH RIGHT STRATEGY INC	tte of Public Distribution/Dissemination			
Mailing Address 1155 - 15TH STREET NW	08 10 2016			
	nount			
City State Zip Code	1147.22			
	nsaction ID : SE.38208 tte of Disbursement or Obligation			
Purpose of Expenditure VOTER CONTACT MAIL  Category/ Type  004	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office So	ught: House District: 00			
DOMAIN DUADOLD JOURSON	sident State: WI			
Calendar Year-To-Date Per Election for Office Sought  Disburser 2016	nent For:			
(a) SUBTOTAL of Itemized Independent Expenditures	2294.44			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
SCOTT B MACKENZIE  [Electronically Filed] Date 08	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				

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#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

**PAGE** OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 X 48-hour report New report Check if 24-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 80 2016 10 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** State Zip Code City 1147.22 DC 20005 Transaction ID: SE.38209 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 80 10 2016 Type Name of Federal Candidate 00 X Support Office Sought: District: House MARCO RUBIO FL Oppose X Senate President State: Disbursement For: Primary X General Calendar Year-To-Date 1147.22 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 08 10 2016 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** City State Zip Code 1147.22 WASHINGTON DC Transaction ID: SE.38210 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **VOTER CONTACT MAIL** 2016 80 10 Type Name of Federal Candidate 04 X Support Office Sought: X House District: MIA LOVE UT Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 2016 52786.92 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 2294.44 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 08 12 2016 Date Signature

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

						FOR SE OF	FORM 24/48
	OF COMMITTEE (In Full) OP (VIRGIN ISLANDS REPUBLICA	······································	Y)			DENTIFICATION	ON NUMBER ▼
	,		,		C	C00553560	
Check if	24-hour report X 48-hour report	New repo	ort Amends rep		М = М	/ D D /	Y = Y = Y
Full	Name of Payee DRTH RIGHT STRATEGY INC			Date	of Publ	ic Distribution/	Dissemination
					08 <sup>M</sup>	10	2016
Mail	ing Address 1155 - 15TH STREET NW SUITE 410			Amo	unt		
City		State	Zip Code				1147.22
WA	SHINGTON	DC	20005			ID: SE.38211 ursement or C	
	pose of Expenditure TER CONTACT MAIL		Category/ Type 004	4	M M M	10	2016
Nan	ne of Federal Candidate		X Support	Office Soug	ıht:	X House	District: 23
WIL	LLIAM HURD		Oppose	Presi	dent	Senate	State: TX
	Calendar Year-To-Date Per Election for Office Sought		54657.25	Disburseme 2016		Primary pecify) ▶	General
	Name of Payee			Date	of Publ	ic Distribution/	Dissemination
	ORTH RIGHT STRATEGY INC				M M M	10	2016
Mai	ling Address 1155 - 15TH STREET NW SUITE 410			Amo	ount		
City		State	Zip Code				1147.22
WA	ASHINGTON	DC	20005			D: SE.38212 oursement or C	Obligation
	pose of Expenditure TER CONTACT MAIL		Category/ Type 004		M M M	10	2016
	ne of Federal Candidate		X Support	Office Sou	ght:	X House	District: 02
ALI	EXANDER XAVIER MOONEY		Oppose	Presi	dent	Senate	State: WV
	Calendar Year-To-Date Per Election for Office Sought		4278.76	Disburseme 2016		Primary	X General
(a) S	SUBTOTAL of Itemized Independent Expenditures			<b>.</b>		7	2294.44
(b) S	SUBTOTAL of Unitemized Independent Expenditure	÷S				1 1 4	
(c) T	OTAL Independent Expenditures			···· <b>\</b>			
with,	r penalty of perjury I certify that the independent or at the request or suggestion of, any candidate committee) any political party committee or its ago	or authorized					
	SCOTT B MACKENZIE	[Electroni	cally Filed] Da	te 08	12	/ Y Y Y 201	6
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### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	INT EXI END	ITOTILO		PAGE 6 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (IN FUII) VIGOP (VIRGIN ISLANDS REPUBL	ICAN PART	Y)		DENTIFICATION NUMBER ▼
		,	C	C00553560
Check if 24-hour report X 48-hour report	New rep	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee FORTH RIGHT STRATEGY INC			M = M	c Distribution/Dissemination
Mailing Address 1155 - 15TH STREET NW			08 Amount	10 2016
SUITE 410				
City	State	Zip Code		1147.22
WASHINGTON	DC	20005		ID: SE.38213 ursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	08	10 / 2016
Name of Federal Candidate		Support	Office Sought:	X House District: 00
RYAN K ZINKE		Oppose	President	Senate State: MT
Calendar Year-To-Date Per Election for Office Sought	7 7	4241.21	Disbursement For: 2016 Other (sp	Primary ☐ General Decify) ▶
Full Name of Payee			Date of Publi	ic Distribution/Dissemination
FORTH RIGHT STRATEGY INC			08	10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1155 - 15TH STREET NW				
SUITE 410			Amount	
City	State	Zip Code		1147.22
WASHINGTON	DC	20005	Transaction II Date of Disb	D: SE.38214 ursement or Obligation
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	08	10 2016
Name of Federal Candidate		X Support	Office Sought:	House District: 06
THOMAS EARL JR. EMMER		Oppose	President	Senate State: MN
Calendar Year-To-Date Per Election for Office Sought	· · · · · · ·	4419.11	Disbursement For: 2016 Other (s	Primary
(a) SUBTOTAL of Itemized Independent Expendit	ures			2294.44
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures			<b>•</b>	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
SCOTT B MACKENZIE Signature	[Electron	ically Filed] Date	08 / 12	2016
Signataro				

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

**PAGE** OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY) C00553560 X 48-hour report X New report Check if 24-hour report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination FORTH RIGHT STRATEGY INC 80 2016 10 Mailing Address 1155 - 15TH STREET NW Amount **SUITE 410** State Zip Code City 13766.79 DC 20005 Transaction ID: SE.38215 WASHINGTON Date of Disbursement or Obligation Purpose of Expenditure Category/ **VOTER CONTACT MAIL** 004 80 10 2016 Type Name of Federal Candidate 00 Support Office Sought: House District: HILLARY RODHAM CLINTON Oppose President Senate State: ✓ General Disbursement For: Primary Calendar Year-To-Date 2016 109368.32 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 13766.79 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... 27533.43 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. SCOTT B MACKENZIE [Electronically Filed] 08 12 2016 Date Signature